

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | MW | | 06-25-01 |
| O.I.P.E. CLASSIFIER | MW | 50 | 07-07-01 |
| FORMALITY REVIEW | CV | 903 | 08-16-01 |
| RESPONSE FORMALITY REVIEW | MTB | 954 | 11/1/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Final Original | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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JC-811
 08/13/01
 JC-571
 11/02/01